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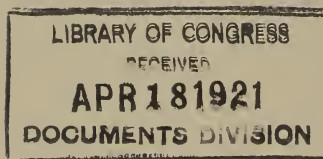


Class LB 3455
Book, B 75

A Message to the Parents of School Children



Presented by
The Dental Committee
of the
Bridgeport Board of Health



LB3455
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TO THE PARENTS.

In order that you may understand clearly just what the Dental Committee, working under the Board of Health, is trying to accomplish for your children in our public schools, we are sending this little booklet to you and ask you to carefully read same.

The MOUTH IS THE GATEWAY TO OUR BODIES. If the mouth contains decayed teeth and decomposed food, then there are thousands of germs within this cavity and all of the fresh food taken at each meal becomes poisoned by these germs. This poisoned food is carried into the stomach and intestines causing in time, a bodily poisoning which is shown in the child by constipation, headache, dizziness, languid feeling, trouble with the eyesight, fevers, liability to colds and the many other small illnesses of child life.

But these ailments are only a small part of the real serious dangers arising from DECAYED TEETH and UNCLEAN MOUTHS. Many of these decayed teeth produce abscesses and the pus, or matter, discharged from these abscesses and continually swallowed, will eventually so poison the child's system that anaemia is frequently produced. Anaemia is a disease of the blood and from this the child becomes pale in color and weakened physically.

You can readily understand that if the reservoirs of the city should become filthy and infected with typhoid germs, in a short time the whole population would be affected by an epidemic of sickness. And so it is with our bodies. No matter how pure the food that we eat is, if it passes through an unclean mouth it becomes laden with the germs that thrive in such mouths. If we have sound teeth and clean mouths then the food will reach our stomachs in a clean state and can properly nourish our bodies.

Would you not like to protect your child from the serious diseases of early life such as scarlet fever, diphtheria, mumps, measles, whooping cough, tonsilitis, etc.? Let us quote to you what has been done in one institution alone in the elimination of children's diseases.

In St. Vincent's Orphan Asylum, Camden Street, Boston, Mass., there are close to three hundred and fifty children. In the year 1910 the matron became convinced that the bad condition of the children's mouths had much to do with their sickness. A room was furnished with a dental chair and equipment and Dr. F. A. Keyes, of Boston, was employed to put the children's mouths in a sound, sanitary condition.

Work was started in November, 1910, and in April, 1911, the mouth of the last child had been put in order. Study the following table and note that for nearly four years the diseases of childhood have been practically eliminated. The six cases of measles occurring during 1913 were caused by a new child whose mouth was in a bad condition on entering and the children infected were all in need of additional dental service. The one case of diphtheria was also from a new child with bad teeth.

	1907 1908	1908 1909	1909 Nov. 1910	Nov. 1910 Apr. 1911	Apr. 1911 Apr. 1912	Apr. 1912 Apr. 1913	Apr. 1913 Apr. 1914	Apr. 1914 Jan. 1915
Diphtheria,	6	2	1	0	0	0	1	0
Mumps,	8	3	10	4	0	0	0	0
Scarlet fever,	17	8	12	8	0	0	0	0
Pneumonia,	3	5	4	6	0	0	0	0
Measles,	24	50	40	25	0	0	6	0
Tonsilitis,	19	16	8	3	0	0	0	0
Whooping cough,	7	2	2	0	0	0	0	0
Chicken pox,	15	17	10	6	0	0	0	0
Croup,	4	0	0	0	0	0	0	0
Tuberculosis of eye,	—	—	—	—	1	0	0	0
Tuberculosis of lungs,	—	—	—	—	1	0	0	6
	103	103	87	52	2	0	7	6

WE DO NOT BELIEVE THAT SOUND TEETH AND CLEAN MOUTHS WILL END ALL OF OUR PHYSICAL AILMENTS, BUT WE DO BELIEVE THAT THEY ARE POWERFUL FACTORS FOR HEALTH AND FOR THE PREVENTION OF DISEASE.

Furthermore we would call your attention to the possibility of improper brain development in children whose teeth are so badly decayed that the child cannot properly chew his food. We have a set of muscles that opens the mouth and a set that closes it. These are known as the muscles of mastication. The muscles that close the jaw are very powerful and capable of exerting a great pressure between the teeth when they are closed. Close your teeth together and bite hard and you can feel with your fingers how the muscles swell out on the side of your head.

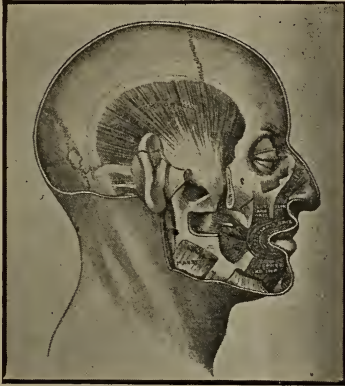


Fig. 1

Fig. 1 shows the attachment of the powerful temporal muscle. In childhood, if the teeth are sound, and hard and coarse foods are eaten, such as toast, crusts of bread, sweibach, meats, fried potatoes, etc., this muscle exerts a great force upon the side of the head and so expands the cranium or brain case.



Fig. 2

Fig. 2 shows the attachment of two more muscles to the underside of the skull. It may be seen how these muscles pull downward and how they will enlarge the brain case in this direction when they act.

Now if the child has decayed or sore teeth and can only chew on one side of the jaws, the muscles on the opposite side do not work properly and their pull or tension on the brain case is greatly weakened

so that the brain case does not grow to its proper size. Of course the brain cannot fully grow if the bone around holds it back.

Dr. Lawrence W. Baker of Boston has demonstrated upon animals what effect this lack of power to properly chew food has upon the skull and also upon the brain. Taking a litter of four rabbits, he ground down the teeth on the lower jaw on the right side of two of them so that they could chew only on the left side. The four rabbits were then fed the same food, living together under the same conditions, the only difference being the inability of the two rabbits to chew their food on the right side. At the end of seven months the rabbits were chloroformed and the skulls prepared for examination.



Fig. 3

Fig. 3 shows the top view of the skull of the rabbit whose teeth were not ground and who could chew on both sides of the jaw. The line running straight through the skull shows where the bones of both sides of the skull join. Note how equally all portions of the skull are developed.



Fig. 4

Fig. 4 is the same view of one of the rabbits whose teeth were ground on the right side. Note how the muscles have developed and pulled the bones toward the left side and how underdeveloped is the right side.



Fig. 5

Fig. 5 shows the under surface of the skull of the normal rabbit with the teeth clean and polished from use and all of the bones perfectly developed.

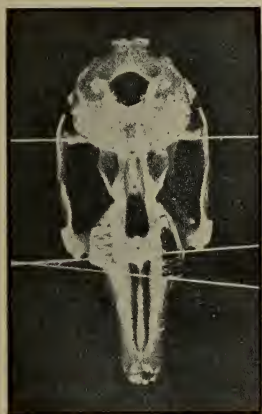


Fig. 6

Fig. 6 shows the same view of the skull of the disabled rabbit. Note how the muscles have pulled down and flattened out the bone on the right side which contains the unused teeth.



Fig. 7

Fig. 7 shows the back view of the skull, and this is the most interesting of all. Not only is the left side better developed than the right side, but the top of the cranium or brain case is higher, while the right side is flattened out and has much less capacity. In fact the skull of the normal rabbit was filled with shot which was later poured into the skull of the demonstrating rabbit and it was found that there was considerable shot left over after the latter was filled.

In presenting this demonstration we wish to call attention to the fact that it is extremely important to keep the baby teeth in a sound and healthful condition so that the child can chew on both sides of the mouth. Unequal brain development means an abnormal brain and an abnormal brain means abnormal thought and actions. A physically perfect child is pretty apt to be normal in every way.

SOME COMMON CAUSES OF DEFORMED MOUTHS.

Have you ever stopped to think how many people would be considered fine looking were it not for their unsightly mouths due to irregular and malplaced teeth? Now irregular teeth are not inherited. They are made irregular because nature, for some reason, is not allowed to do her work properly and so she is unable to place the teeth in their right position. Below are given some of the causes of these irregular teeth and if you will read them over carefully, you may be able to save your child from a serious facial deformity.

CAUSE No. 1. The loss of the baby teeth long before it is time for the second ones to take their place. (Fig. 8 and 9)

One of the things that a baby tooth does is to hold room in the jaw for the second tooth that is to follow it. When a baby tooth is lost some time before the second one is formed and ready to come up, the space where it was closes and the second tooth is crowded out. Then when it is time for this second tooth to come into the mouth, it must take a position out of line with the other teeth or become badly turned. Therefore, **TAKE CARE OF THE BABY TEETH.**

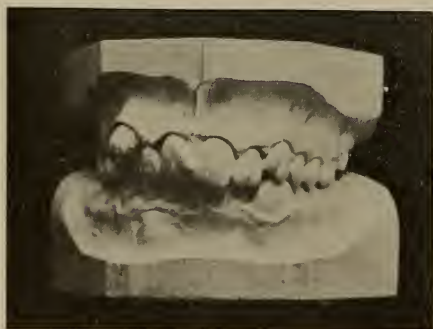


Fig. 8

Irregular teeth caused by early loss of baby teeth

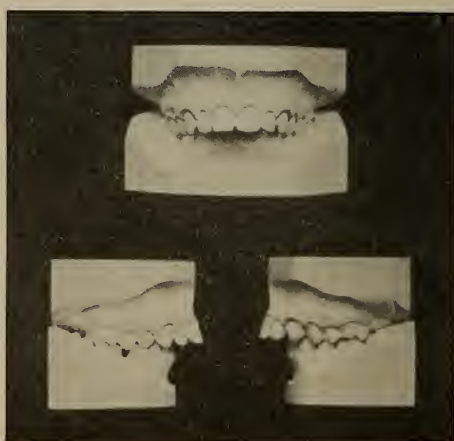


Fig. 9

Bad mouth deformity caused by loss of two lower baby teeth

CAUSE NO. 2. Loss of permanent teeth, particularly the first molars.

The first permanent teeth to come into the mouth are the six year molars. These are the four large double teeth that come through the gums **BEHIND** the baby teeth. No baby tooth is shed in the place where these come in and so parents are apt to think these are the first teeth. The truth is that they are the **MOST IMPORTANT** of the permanent teeth as they hold the jaws in proper position and do all the chewing of food while the first teeth in front of them are shed. When these first molars are lost through decay, the jaws slip out of their proper position, and the face is deformed as shown in the pictures. (Fig. 10-11)



Photos by courtesy of Dr. C. C. Howard

Fig. 10

Child six years old. Mouth normal. Sixth year molars just erupting, which through neglect, decayed and were lost three years later.

This is the same girl at eighteen years of age.



Photos by courtesy of Dr. E. H. Angle

Fig. 11

This expression of the face is frequently produced by loss of the sixth year molars.

This is the way the boy should have looked.

CAUSE No. 3. Failure to eat hard foods and to chew the food long enough.

We all know that a muscle grows big if we use it a great deal but perhaps you do not know that the bone to which this muscle is attached also grows larger when the muscle is used. And so if the muscles of the jaws are used to chew hard foods and to chew them for a long period, the jaw bones themselves are made to grow and room is thus obtained for the large second teeth. In a child of five years of age there should be considerable space between each of the baby teeth in the front of the mouth. (Fig. 12) If spaces do not come between these teeth the jaw is not growing properly and the second teeth will surely come in crooked. (Fig. 13)



By courtesy of Dr. H. C. Ferris

Fig. 12

Jaws developing properly
Note the spaces between the baby teeth

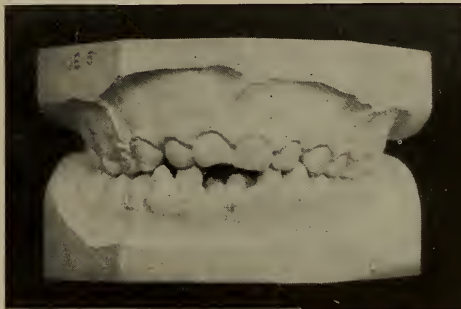


Fig. 13

Jaws not developing
Second teeth will come in very crooked

CAUSE No. 4. Bad Habits.

Children are often allowed to suck their fingers or thumbs when babies, and continue this habit over a period of several years. The presence of the fingers in the mouth and the force exerted by the child in sucking cause many very bad deformities. (Fig. 14) All such tendencies should be checked before they become habits, for after these habits are formed they are almost impossible to break.

Often we find children holding the lower lip or the tongue between the upper and lower front teeth. These seem little things but they are the forerunners of very bad deformities.

One of the worst habits that mothers unconsciously teach children is to hold a hard rubber baby comforter in their mouths when going to sleep, and while asleep. These comforters have ruined many mouths and should never be given to a child. (Fig. 15)



Fig. 14

Mouth deformed by sucking thumb

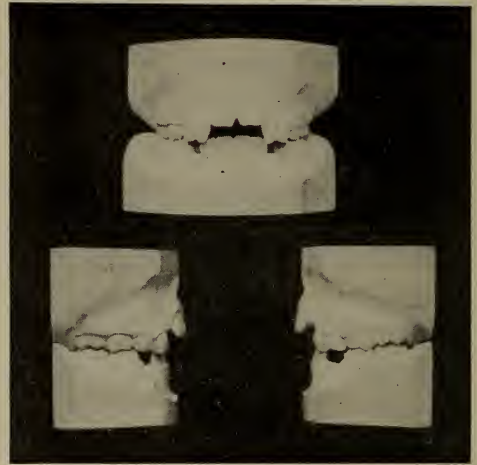


Fig. 15

Mouth deformed by having a "baby comforter" always in the mouth

CAUSE No. 5. Breathing through the mouth instead of the nose. (Fig. 16)

Mouth breathing in children is usually due to adenoids which are growths in the back of the nose that stop up the air passage and force the child to open the mouth and breathe through it. If your child is sleeping with his mouth open or is breathing through his mouth when awake, you should consult a specialist in nasal diseases or take him to the hospital for treatment.



Fig. 16

Bad mouth deformity due to breathing through
the mouth

THE WORK IN THE SCHOOLS.

The Dental Committee believes that it is much more sensible to prevent teeth from decaying than to establish a clinic for just the filling of teeth. We know that "A Clean Tooth Never Decays." If the children's teeth can be cleaned and polished at frequent intervals, and they are taught how to brush the teeth and the parents will see that they do brush them after each meal, we can prevent in a great measure, any cavities from forming in the second teeth. We are trying to help the children to learn to help themselves.

During the first round of work in the public schools this year we cleaned and polished the teeth of 11,314 children. This number includes all the children of the first four grades. In the mouths of these children we found 65,077 cavities in the baby teeth. On account of decayed or sore teeth many of the children could chew on but one side of the mouth, while some of them had no teeth left in the back of the mouth as they were decayed down to the gums.

Parents can greatly aid us by encouraging the children to brush their teeth after every meal, by insisting that they thoroughly chew their food, and by seeing that they are kept supplied with clean and serviceable tooth brushes.

Fig. 17



Dental Supervisors, Mrs. Winifred A. Hart and Miss Rose E. House with their staff of fourteen Dental Hygienists and School Dentist, Dr. B. Elizabeth Beatty.

Fig. 18



Miss House and four of her assistants working in Waltersville School.

Fig. 19



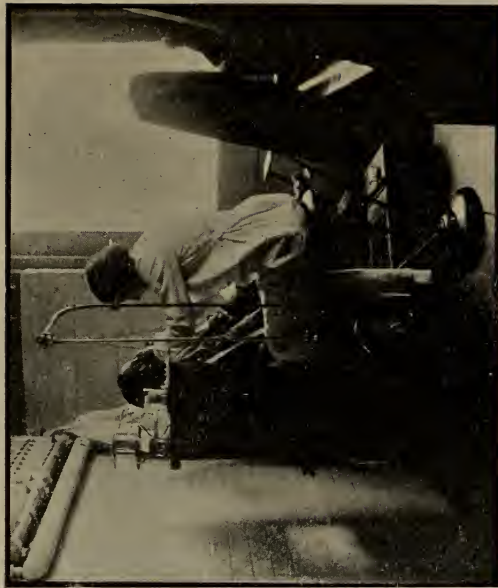
Mrs. Hart and four of her assistants working in Waltersville School.

Fig. 20



Miss Hanley

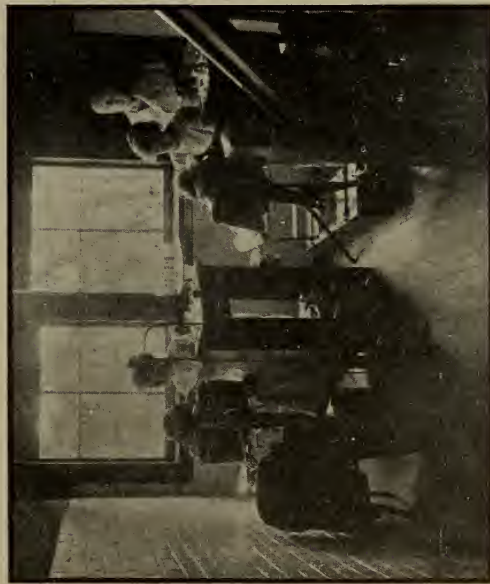
Fig. 21



Miss Rosenthal

These illustrations show two of the Dental Hygienists working on two unused landings in Prospect Street School.

Fig. 22



Miss Green and Miss Graham

Sometimes a landing is used for a short time, when it is deep, and there is ample room for matching lines.

Sometimes a cloak room is found very convenient.

Fig. 23



Miss Lyford

Fig. 24



Miss Knopf

Fig. 25



Miss House, Miss Poland, Miss Meath

There are times that the corner of a class room has been used. If there is a good light and it is warm enough the basement is used as illustrated in Clinton Avenue School.

Fig. 26



Miss House and two of her assistants giving a tooth brush drill at Garfield School.

Fig. 27



Mrs. Hart and two of her assistants giving a tooth brush drill at Franklin School.

Fig. 28



A good view of the children. It is surprising how quickly they learn to use the tooth brush. If the parents will encourage them to use it at home, we can do much in preventing their teeth from decaying.

Parents may rest assured that the utmost precautions are taken and that everything done for the children is conducted in an absolutely sanitary manner. We know of no dental offices where greater attention is given to sterilization than is given in this work in the schools. The hands of the operators are washed thoroughly after working for each child. The paper covers on the top of the cabinets are changed each time so that polishers being used and laid on the cabinet may not leave infection. Oilcloth covers for the chairs and bibs are washed after each patient, so that with sterilizing agents for the polishers, mouth mirrors, etc., the work as conducted is cleanliness itself. Each operator has two complete sets of instruments. One is undergoing sterilization all the time the other set is in use.



Fig. 29

Fig. 29 shows one of the tooth brush sterilizers. The brushes rest in copper trays. The trays are punched in form the same as the seats and aisles represented in the class room. Formaldehyde is used for the sterilizing agent.

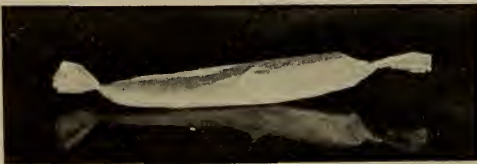
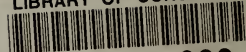


Fig. 30

When the brush is sent home by the child it is wrapped in a piece of oiled paper as shown in Fig. 30.

From time to time further information of the progress of our work will be supplied and your cooperation solicited.

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